

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213567081					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: ZETA LAMBDA EDUCATION FOUNDATION, ALPHA PHI ALPHAFRATERNITY, INC.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: IVAR F BROWNE 236 ASPEN BLVD YORKTOWN, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: YORK COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 9/30/2013</p> <p>SCC ID NO: 05087960</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED			
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: P.O. BOX 672</p> <p style="margin-left: 40px;">CITY/ST/ZIP: NEWPORT NEWS, VA 23607</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JERROLD W ROY TITLE: TREASURER ADDRESS: 305 S. SOUTH STREET CITY/ST/ZIP/CO: HAMPTON, VA 23664 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: JERROLD W ROY TITLE: TREASURER ADDRESS: 305 S. SOUTH STREET CITY/ST/ZIP/CO: HAMPTON, VA 23664	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JARRIS L TAYLOR, JR. DIRECTOR 128 PONSONBY DRIVE YORKTOWN, VA 23693	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PETER LUCUS DIRECTOR 3201 NASA DRIVE HAMPTON, VA 23666	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	OBEN B JOHNSON, SR. DIRECTOR 138 PARMA COURT NEWPORT NEWS, VA 23608	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ CHRISTOPHER P WATKINS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CHRISTOPHER P WATKINS, CHAIRMAN PRINTED NAME AND CORPORATE TITLE	6/11/2014 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			